

Docket No. 87321.1660  
Customer No. 30734

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent No.: 7,408,442 B2 ) Confirmation No.: 7376  
  )  
Inventors: Raymond J. LeBLANC, et al. ) Group Art Unit: 2612  
  )  
Issue Date: August 5, 2008         ) Examiner: Thomas J. Mullen

For: PROGRAMMABLE EVENT DRIVER/INTERFACE APPARATUS AND METHOD

PETITION UNDER 37 C.F.R. §3.81(b)

**MAIL STOP - PETITIONS**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Pursuant to 37 C.F.R. §3.81(b), this is a Petition for the patent to be corrected to state the name of the Assignee, **GE Security, Inc.**, on the issued patent. The undersigned asserts that GE Security, Inc. was listed as the Assignee on the Issue Fee Transmittal form (the Issue Fee was paid May 28, 2008), a copy of which is attached hereto. It is also noted that the Assignment was submitted for recordation on February 9, 2006, as set forth in 37 C.F.R. §3.11, prior to issuance of the patent. A copy of the Notice of Recordation of Assignment is also attached hereto.

Authorization is hereby given to charge Deposit Account No. 50-2036 the amount of \$130 (the processing fee set forth in 37 C.F.R. §1.17(i)) to cover the cost of filing this Petition. No additional fees are believed necessary. However, please charge any shortage in fees due in connection with the filing of this paper, including extension of time fees, to Deposit Account 50-  
2036 and please credit any excess fees to said deposit account.

JUSTICE DATE: 07/23/2008 LKH/LUK  
07/22/2008 INTERF5W 00002301 502036 10664911  
01 FC:1464 130.00 CR  
02 FC:1811 100.00 CR

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

**REQUEST FOR PATENT FEE REFUND**

1 Date of Request: <u>09/25/08</u>		2 Serial/Patent # <u>10664911</u>		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
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<input checked="" type="checkbox"/>	No Fee Due (Explanation):  The filing of this request was due to USPTO error.			
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>Christina Tartera Donnell</u>		TITLE: <u>Petitions Attorney</u>		
SIGNATURE: <u>/christina tartera donnell/</u>		PHONE: <u>571-272-3211</u>		
OFFICE: <u>Office of Petitions - 4700</u>				
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*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*

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